Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10647440

|  |  |   | <u>\</u>           | <u> </u>                      | <u>. (</u>                   | ιιΟ              |   |           |                        |    |                     |                        |
|--|--|---|--------------------|-------------------------------|------------------------------|------------------|---|-----------|------------------------|----|---------------------|------------------------|
|  |  | CLAIMS AS                                 | FILED -<br>(Column |                               | (Column 2)                   |                  |   | MALL EN   | ITITY                  | OR | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS   |  |   | 13                 |                               |                              |                  | ſ | RATE      | FEE                    |    | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED       |                               | NUMBER EXTRA                 |                  | Ī | BASIC FEE | 385.00                 | OR | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | (3 minus 20=       |                               | *                            |                  | ĺ | X\$ 9=    |                        | OR | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |   | <b>₹</b> min       | nus 3 =                       | *                            |                  | ı | X43=      |                        | OR | X86=                |                        |
| MU   | ILTIPLE DEPEN  | DENT CLAIM PI                             | RESENT             |                               |                              |                  | Ì | +145=     |                        | OR | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                    |                               |                              | olumn 2          | L | TOTAL     |                        | OR | TOTAL               |                        |
|  |  |   | MENDED - PART II   |                               |                              | (Column 3)       |   | SMALL     | NTITY                  | OR | OTHER<br>SMALL      |                        |
| ENT A  |  | CLAIMS REMAINING AFTER AMENDMENT          |                    | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY         | PRESENT<br>EXTRA |   | RATE      | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus              | **                            |                              | =                |   | X\$ 9=    |                        | OR | X\$18=              |                        |
|  | Independent  | *   | Minus              | ***                           |                              | =                |   | X43=      |                        | OR | X86=                |                        |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                    |                               |                              |                  | Ī | +145=     |                        | OR | +290=               |                        |
|  |  |   |                    |                               |                              |                  |   | TOTAL     |                        |    | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                    |                               |                              |                  |   |           |                        |    |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE      | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **                            |                              | =                |   | X\$ 9=    |                        | OR | X\$18=              |                        |
|  | Independent  | *   | Minus              | ***                           |                              | =                | Ī | X43=      |                        | OR | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                    |                               |                              |                  |   | +145=     |                        | OR | +290=               |                        |
|  |  |   |                    |                               |                              |                  |   |           |                        | OR | TOTAL<br>ADDIT. FEE |                        |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1)                   |  |   |                    |                               |                              |                  |   |           |                        |    |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGH<br>NUM<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE      | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **                            |                              | =                |   | X\$ 9=    |                        | OR | X\$18=              |                        |
|  | Independent  | *   | Minus              | ***                           |                              | =                |   | X43=      |                        | OR | X86=                |                        |
| $\mathbb{L}^{\!\!\!\!/}$   | FIRST PRESENTATION OF MULTIPLE DEPENDE   |   |                    |                               | T CLAIM                      |                  |   |           |                        | 1  | +290=               | <u> </u>               |
|  | If the entry in colu   | l   | +145=              |                               | OR                           | +290=            |   |           |                        |    |                     |                        |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                    |                               |                              |                  |   |           |                        |    |                     |                        |